

**UNITED STATES DISTRICT COURT FOR THE  
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION**

**UNITED STATES OF AMERICA,**

**Plaintiff,**

**v.**

**COOK COUNTY, ILLINOIS;  
THOMAS DART, COOK COUNTY  
SHERIFF (in his official capacity);  
TONI PRECKWINKLE, COOK COUNTY  
BOARD PRESIDENT (in her official capacity);  
COOK COUNTY BOARD OF  
COMMISSIONERS (in their official capacity),**

**Defendants,**

**No. 10 cv 2946**

**Judge Virginia Kendall**

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**Monitor Harry E. Grenawitzke's Final Report No. 12  
July 21, 2016**

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**Harry E. Grenawitzke, RS, MPH, DAAS  
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## Executive Summary

June 20-24, 2016

This report summarizes the findings from the 12<sup>th</sup> tour of CCDOC. This tour is the second of three tours required by the Consent Agreement between the US Department of Justice Civil Rights Division and Cook County to document that CCDOC continues to sustain all 39 provisions for fire, life safety and environmental health. Eight provisions whose responsibility was Cook County Department of Facilities Management were concluded in June, 2015 by Judge Virginal Kendall.

I want to thank the staff for the hard work to provide the extensive documentation and reports requested prior to the tour and their flexibility as the housing unit tours on this visit were unannounced and randomly selected. As a result, the visit was thorough and efficient. I particularly recognize and appreciate the commitment, dedication and investment in time of Nneka Jones Tapia, Deborah Boecker, Robert Moore, and Matthew Burke, and their staff at CCDOC; Bilqis Jacob-El and staff from DFM; and Chris Wurth from Cermak to share their ideas and suggestions for improvement are clearly recognized. I want to thank Sheriff Thomas Dart for the time to meet and open discussions on a variety of topics to improve conditions of confinement within CCDOC and for his leadership to expectation to continually assess and make improvements.

Since the previous tour in March, 2016, CCDOC continues significant progress in implementing its internal auditing program designed to measure staff accountability for all CCDOC policies and procedures and a tool to demonstrate “continuous improvement” in the management of Corrections. CCDOC, like most organizations, want to verify the implementation of their policies, training, and services and measure their effectiveness. They want to know what is going well, what can be done to identify improvement opportunities and how do they add more values from their initiatives. In other words to senior management

continuous improvement is to improve the operation; to middle management it is to improve the operational processes and to the staff is to improve the activities and functions in which they are involved.

The Compliance Team has completed the audit of the emergency key policy and inmate hygiene supply policy. In both cases where non-conformities were identified, an analysis was done to understand the underlying cause and implemented corrective action provisions to resolve the identified issue. Through this process the non-conformity identified should not reoccur.

CCDOC completed two internal audits training courses for over 60 staff and have another one planned. They have trained five lead auditors and are beginning the process to add ten to fifteen new auditors as they ramp up audits.

Similarly, Cermak is in the development stage to create an audit platform for its services. The initial focus will be on their environmental services. The Monitor will continue to review progress during future tours. They also plan to conduct internal audit training for designated staff.

For this tour the Monitor again assessed implementation of policies and procedures established to address the fire and life safety and environmental health provisions for Cook County Department of Corrections (CCDOC) and Cermak Medical and Mental Health Facilities (Cermak). As part of the tours I interviewed inmates, correction staff, supervisors, and management; held meetings with the fire safety committee, Department of Facilities Management staff, and Cermak management staff. I toured Divisions 4, 6, 10 and 11, laundries in Division 4 and 5, the Central Kitchen and the Division 11 and chemical and sanitation rooms. Time did not permit me to visit every housing unit in the Division's toured. However, the observations of the tiers visited provide the basis for this report.

As a result of this tour all provisions continue to be "substantially compliant." Only two of the 30 remaining provisions (G-83.b and G-83.i) have not yet demonstrated substantial compliance for 18 months as required in the

agreement. They are highlighted in yellow in the summary chart and in the narrative report. At the conclusion of the next tour, they will have demonstrated substantial compliance for 18 months. Those that have demonstrated substantial compliance for at least 18 months are highlighted in green in both the summary chart and the narrative report.

Significant progress and improvements highlighted in the report include:

1. Continued reduction of detainees to less than 8800.
2. Completed annual training for safety/sanitation officers. There is now a minimum of two safety/sanitation officer in all Divisions on all shifts.
3. Continued improvement in housekeeping in most divisions;
4. Implementations of the policy to assure detainees have ready access to hygiene items.
5. Continued significant reduction in the maintenance backlog for all work orders, but specifically plumbing and electrical;
6. Significant reduction in the number of aging plumbing and electrical work orders over 30 days
7. Conducting more internal audits and developing and implementing a new user friendly electronic root cause analysis and corrective action report.
8. Improved use of the CCDOC laundry for inmate personal clothing.
9. Thorough investigations of fires resulting in equipment modifications to prevent future fires (encasing televisions and outlets to prevent accessibility).

Throughout the tour the Monitor identified and discussed with staff and management issues where improvements can be made for the fire, life safety, and environmental health provisions. However no systemic issues were

identified. As a result all provisions remain substantially compliant with the Consent Agreement.

I continue to be available to assist the Department of Justice and CCDOC management and staff to discuss and help resolve issues as they arise

Sincerely,

*Harry F. Grenawitzke*, RS, MPH, DAAS

Monitor for Fire, Life Safety and Environmental Health

**Summary June 29, 2016**

Section	Language	Substantial Compliance	Partial Compliance	Non- compliance
<b>C.</b>	<b>Medical Care</b>			
<b>C. 53</b>	<b>Treatment and Management of Communicable Disease</b>			
C. 53e	Cermak shall ensure that the negative pressure and ventilation systems function properly. Following CDC guidelines, Cermak shall test daily for rooms in-use and monthly for rooms not currently in-use. Cermak shall document results of such testing.	3/11 8/11 12/11 2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 7/12	
C. 53f	Cermak shall notify DFM, in a timely manner, of routine and emergency maintenance needs, including plumbing, lighting and ventilation problems.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	3/11 8/11 12/11	9/10
<b>F.</b>	<b>Fire and Life Safety</b>			
F. 71	CCDOC and DFM shall work together to develop and implement a fire safety program and ensure compliance is appropriately documented. The initial Fire Safety Plan shall be approved by the fire prevention authority having jurisdiction. The Fire Safety Plan shall be reviewed thereafter by the appropriate fire prevention authority at least every two years, or within six months of any revisions to the plan, whichever is sooner. Fire safety and	12/11 7/12 2/13 9/13  3/14 10/14	9/10 3/11 8/11	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
	emergency procedures shall be standardized across divisions, to the extent possible given differences in physical plant and security levels.	4/15 3/16 6/16		
F. 72	CCDOC shall develop and implement an evacuation plan for inmates and staff and ensure that comprehensive fire drills are conducted every three months on each shift. CCDOC shall document these drills, including start and stop times and the number and location of inmates who were moved as part of the drills.	12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	Not Assessed 9/10 3/11 8/11	
F. 73	DFM shall ensure that the Facility has adequate fire and life safety equipment, including installation and maintenance of fire alarms and smoke detectors in all housing areas according to applicable fire codes. Maintenance and storage areas shall be equipped with sprinklers or fire resistant enclosures in accordance with City of Chicago Fire Code (13-76-010).  <b>CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15</b>			
F. 74	DFM shall ensure that all fire and life safety equipment is properly maintained and routinely inspected. DFM shall develop and implement a program related to the testing, maintenance and inspection of the Life Safety Equipment.  <b>CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15</b>			
F. 75	CCDOC shall continue to ensure that emergency keys are appropriately marked and identifiable by touch and consistently stored in a quickly accessible location, and that staff are adequately trained in use of the emergency keys.	2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 12/11 7/12	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
F. 76	CCDOC shall ensure that staff are able to manually unlock all doors (without use of the manual override in the event of an emergency in which the manual override is broken), including in the event of a power outage or smoke buildup where visual examination of keys is generally impossible. CCDOC shall conduct and document random audits to test staff proficiency in performing this task on all shifts, a minimum of three times per year. CCDOC shall conduct regular security inspections of all locking mechanisms. CCDOC shall communicate with DFM via the Work Order System regarding lock-related issues and maintenance.	2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 12/11 7/12	
F. 77	DFM shall develop and implement an annual preventative maintenance program concerning security devices such as doors locks, fire and smoke barrier doors, and manual unlocking mechanisms to ensure these devices function properly in the event of an emergency.  <b>CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15</b>			
F. 78	CCDOC shall implement competency-based testing for staff regarding fire and emergency procedures.	8/11 12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	Not assessed 9/10 X3/11	
F. 79	CCDOC shall promptly notify DFM of all electrical hazards, including maintenance and repair of electrical outlets, devices, and exposed electrical wires.	7/12 2/13 9/13 3/14 10/14 4/15 3/16	9/10 3/11 8/11 12/11	



Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
		6/16		
F. 80	DFM shall promptly repair all known electrical hazards, including maintenance and repair of electrical outlets, devices, and exposed electrical wires and will document repairs by the Work Order System.  <b>CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15</b>			
F. 81	CCDOC shall ensure that combustibles are controlled and eliminate highly flammable materials throughout the facility and inmate living areas (e.g., inmates 'use of paper bags as trash receptacles, ripped fire-retardant mattress covers, improvised cell light covers, blankets on cell floors, and improperly stored and labeled flammable liquids and other chemicals).	9/13 3/14 10/14 4/15 3/16 6/16	3/11 8/11 12/11 7/12 2/13	9/10
F. 82	CCDOC shall ensure that fire safety officers are trained in fire safety and have knowledge in basic housekeeping, emergency preparedness, basic applicable codes, and use of fire extinguishers and other emergency equipment.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	Not Assessed 9/10 3/11 8/11	
<b>G</b>	<b>SANITATION AND ENVIRONMENTAL CONDITIONS</b>			
<b>G. 83</b>	<b>Sanitation and Maintenance of Facilities</b>			
G. 83a	DFM shall maintain an adequate written staffing plan and sufficient staffing levels to provide for adequate maintenance of the Facility.  <b>CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15</b>			
G. 83b	CCDOC shall revise and implement written housekeeping and sanitation plans to ensure the proper routine cleaning of housing, shower, and medical areas, in accordance with generally accepted correctional standards. Such policies should include oversight and supervision, including meaningful inspection processes and	4/15 3/16 6/16	9/10 3/11 8/11 12/11 7/12	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
	documentation, as well as establish routine cleaning requirements for toilets, showers, and housing units.		2/13 9/13 3/14 10/14	
G.83c	DFM shall implement a preventive maintenance plan to respond to routine and emergency maintenance needs, including ensuring that shower, toilet, and sink units are adequately maintained and installed.  <b>CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15</b>			
G. 83d	CCDOC shall notify DFM, in a timely manner, of routine and emergency maintenance needs, including plumbing, lighting, and ventilation problems.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	8/11 12/11	9/10 3/11
G.83e	DFM shall ensure adequate ventilation throughout the Facility to ensure that inmates receive an adequate supply of air flow and reasonable levels of heating and cooling. DFM staff shall review and assess compliance with this requirement on a daily basis for automated systems and on an annual basis for non-automated systems.  <b>CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15</b>			
G. 83f	CCDOC shall notify DFM of any visible obstructions to the ventilation system.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	3/11 8/11 12/11	9/10

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
G. 83g	Cook County shall ensure adequate lighting in all inmate housing and work areas.	2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 12/11 7/12	
G. 83h	CCDOC shall ensure adequate pest control throughout the housing units, medical units, RCDC, RTU, and food storage areas. CCDOC shall maintain a contract for professional exterminator services for each division, food services areas, and the Cermak hospital. Services should provide for routine pest control spraying and additional spraying as needed.	2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 X12/11 X 7/12	
G. 83i	CCDOC shall ensure that all inmates have access to needed hygiene supplies.	4/15 3/16 6/16	Not Assessed 9/10 or 3/11 8/11 12/11 7/12 2/13 9/13 3/14 10/14	
G. 83j	CCDOC shall develop and implement policies and procedures for cleaning, handling, storing, and disposing of biohazardous materials, in accordance with generally accepted correction standards. CCDOC shall ensure that any inmate or staff utilized to clean a biohazardous area are properly trained in universal precautions, are outfitted with protective materials, and receive proper supervision when cleaning a biohazardous area.	2/13 9/13 3/14 10/14 4/15 3/16 6/16	Not Assessed 9/10 3/11 8/11 12/11 7/12	
G. 83k	DFM shall develop a policy on hazardous materials, in accordance			

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
	<p>with generally accepted correctional standards, and insure that all DFM staff is properly trained on the procedure.</p> <p><b>CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15</b></p>			
G. 83l	CCDOC shall provide and ensure the use of cleaning chemicals that sufficiently destroy the pathogens and organisms in biohazard spills.	8/11 12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	Not Assessed 9/10 3/11	
G. 83m	CCDOC shall inspect and replace as often as needed all frayed and cracked mattresses. CCDOC shall destroy any mattress that cannot be sanitized sufficiently to kill any possible bacteria. CCDOC shall ensure that mattresses are properly sanitized between uses.	8/11 2/11 7/12 2/13 9/13 10/14 4/15 3/16 6/16	3/11	9/10
G. 83n	CCDOC shall ensure adequate control and observation of all housing units, including distribution and collection of razors and cleaning supplies. All cleaning tools and hazardous chemical shall be removed from housing areas after use.	8/11 12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
G. 83o	CCDOC shall ensure that Facility sanitarians receive training from a relevant state, national, or professional association with emphasis on assessment of environmental health practices and emerging environmental issues in correctional settings. Facility sanitarians should also have training on and access to testing equipment to ensure sanitary conditions.	12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11	
<b>G. 84</b>	<b>Sanitary Laundry Procedures</b>			
G. 84a	CCDOC shall develop and implement policies and procedures for laundry procedures to protect inmates from risk of exposure to communicable disease, in accordance with generally accepted correctional standards. To limit the spread of communicable disease, CCDOC shall ensure that clothing and linens returned from off-site laundry facility are clean, sanitized, and dry.	8/11 12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11	
G. 84b	CCDOC shall ensure that inmates are provided adequate clean clothing, underclothing and bedding, consistent with generally accepted correctional standards, and that the laundry exchange schedule provides consistent distribution and pickup service to all housing areas.	3/14 10/14 4/15 3/16 6/16	3/11 8/11 12/11 7/12 2/13 9/13	9/10
G. 84c	CCDOC shall train staff and educate inmates regarding laundry sanitation policies.	3/14 10/14 4/15 3/16 6/16	8/11 12/11 7/12 2/13 9/13	9/10 3/11
G. 84d	CCDOC shall ensure that laundry delivery procedures protect inmates from exposure to communicable diseases by preventing clean laundry from coming into contact with dirty laundry or	12/11 7/12 2/13	9/10 3/11 8/11	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
	contaminated surfaces.	9/13 3/14 10/14 4/15 3/16 6/16		
G. 84e	CCDOC shall require inmates to provide all clothing and linens for laundering and prohibit inmates from washing and drying laundry outside the formal procedures.  (* In the Monitor Report #V dated July 20, 2012; this provision was inadvertently recorded "substantial compliance." The provision should have been recorded "partial compliance.")	9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 12/11 7/12* 2/13	
<b>G. 85</b>	<b>Food Service</b>			
G. 85a	CCDOC shall ensure that all food service at the Facility is operated in a safe and hygienic manner and that foods are served and maintained at safe temperatures.	9/13 3/14 10/14 4/15 3/16 6/16	3/11 8/11 12/11 7/12 2/13	9/10
G. 85b	CCDOC shall ensure that all food service staff, including inmate staff, must be trained in food service operations, safe food handling procedures, and appropriate sanitation.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 12/11	
G. 85c	CCDOC shall ensure that the Central Kitchen and Division XI kitchen are staffed with a sufficient number of appropriately supervised	2/13 9/13 3/14	9/10 3/11 8/11	

Section	Language	Substantial Compliance	Partial Compliance	Non- compliance
	and trained personnel.	10/14 4/15 3/16 6/16	12/11 7/12	
G. 85d	CCDOC shall ensure that dishes and utensils, food preparation and storage areas, and vehicles and containers used to transport food are appropriately cleaned and sanitized.	2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 12/11 7/12	
G. 85e	CCDOC shall check and record, on a regular basis, the temperatures in the refrigerators, coolers, walk-in-refrigerators, the dishwasher water, and all other kitchen equipment with temperature monitors to ensure proper maintenance of food service equipment.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 12/11	

## STATUS REPORT

DATE OF STATUS REPORT: 6/28/16

### PROVISION: C. MEDICAL CARE

#### 53. Treatment and Management of Communicable Disease

e. Cermak shall ensure that the negative pressure and ventilation systems function properly. Following CDC guidelines, Cermak shall test daily for rooms in-use and monthly for rooms not currently in-use. Cermak shall document results of such testing.

#### June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

##### Status Update:

Since July, 2012 the Department of Facilities Management (DFM) continues to monitor and record the results of the negative pressure testing for the 18 isolation cells located on the third floor (3-E) of Cermak, along with the enunciator panel once each shift. The records are maintained in the DFM office located in the Cook County Courthouse. Work orders are submitted and appropriate repairs made anytime monitoring demonstrates non-compliance. Occupational and Environmental Hygiene Services at the Great Lakes Center for Occupational and Environmental Safety and Health at the University of Illinois, Chicago, conducts a full testing of the ventilation system annually. Copies of those reports are provided to the Chief Medical Officer of Cermak.

**Monitor's Assessment:** There is no change from the previous report. The pressure monitoring by DFM is included in their Preventative Maintenance Schedule. This provision continues to be in substantial compliance.

##### Monitor's Recommendations:

1. No further recommendations.

### PROVISION: C. MEDICAL CARE

#### 53. Treatment and Management of Communicable Disease

f. Cermak shall notify DFM, in a timely manner, of routine and emergency maintenance



needs, including plumbing, lighting and ventilation problems.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

Cermak submits work order requests through the “Facility Wizard” work order system utilized by DFM for both emergency and routine repairs as well as scheduled maintenance. Cermak’s Environmental Services Director and Assistant Director of Plant Operations/Environmental Services are trained and authorized to enter work order requests to DFM electronically. Since 2012 Cermak has the capability to review the status of all Cermak’s work orders at any time using the online database.

DFM is transitioning to a new cloud-based work order maintenance work order management information system which will allow for real time tracking of work order completion and backlog. The new system will give both Cermak and CCDOC real time access to the same data that DFM receives. They will also be able to print reports that are tailored for CCDOC and Cermak needs.

**Monitor’s Assessment:**

Cermak selected the new Environmental Services Director who will begin June 27<sup>th</sup>. He formerly worked with DFM at the CCDOC complex and is very familiar with the staff as well as the responsibilities for this position. In his former position he participated, along with Cermak staff and the CCDOC Sanitarians conducting the weekly environmental round inspections in the Cermak infirmary and the division specific clinics. Because of the impending transition, the Monitor did not tour Cermak on this visit, but will on the next visit. Management staff at Cermak continues to report excellent response from DFM to quickly resolve maintenance work orders.

Once the new Environmental Services Director is in place, Cermak management plans to initiate the formal internal auditing process similar to CCDOC’s. Cermak staff participated in the audit training provided to CCDOC.

**Monitor’s Recommendations:**

1. Establish and implement an ongoing internal audit policy and procedures that includes identification and regular monitoring of work orders to assure timely response to assure sustainability of the provision.
2. Submit audit reports to the Monitor for review once audits are implemented.

#### **PROVISION: F. FIRE AND LIFE SAFETY**

**71.** CCDOC and DFM shall work together to develop and implement a fire safety program and ensure compliance is appropriately documented. The initial Fire Safety Plan shall be approved by the fire prevention authority having jurisdiction. The Fire Safety Plan shall be reviewed thereafter by the appropriate fire prevention authority at least every two years, or within six months of any revisions to the plan, whichever is sooner. Fire safety and emergency procedures shall be standardized across divisions, to the extent possible given differences in physical plant and security levels.

#### **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

##### **Status Update:**

The Interagency Committee consisting of the Directors of CCDOC, DFM, and Cermak created the Fire Safety Committee (FSC) in August, 2010. They meet monthly to review and assess all the fire safety and prevention systems including Fire Safety, Fire Emergency and Fire Evacuation Interagency Directive, fire investigations, training material, fire drill videos and reports and make improvements as needed. The program is documented in accordance with the provisions of the consent agreement. The Fire Safety committee consists of representatives from the Office of the Sheriff, CCDOC, Cermak Health Services, and DFM. Each division within CCDOC has a written "Fire Safety and Emergency Plan" which includes a detailed emergency evacuation procedure. The plans are reviewed biannually by the City of Chicago Fire Department. Annually the City of Chicago fire safety inspectors complete an inspection of CCDOC facilities. Scheduled, unannounced fire drills are conducted regularly on all shifts for all divisions. When available, an inspector from the Fire Prevention Bureau, along with the responding fire station firefighters participate as part of their response training.

CCDOC, DFM, and Cermak issued the Interagency Directive, 64.5.30.0, effective August 22, 2011 that establishes the policy and procedures for Fire Safety Plans, fire emergency response, and evacuations within CCDOC. The Directive establishes the respective roles and responsibilities

for CCDOC, Cermak, and DFM relating to Fire Safety Plans, emergencies and evacuations. CCDOC has a designated fire safety administrator and fire safety officer position and each division has designated trained safety/sanitation officers assigned for each shift including weekends and holidays. Fire Safety Training is provided as part of initial correction officer orientation program at the Training Institute located in Moraine Valley Community College.

The Fire Safety Interagency Agreement requires divisional Safety/Sanitation Officers to conduct weekly fire safety inspections of all housing, administrative, medical clinics, storerooms, maintenance rooms, classrooms, and common areas within their respective divisions to identify fire safety hazards and resolve them. Living Unit Officers or Post Officers, as appropriate are to conduct documented inspections on the 2300 -0700 shift and record findings on the Living Unit Inspection Form. CCDOC General Order 24.11.1.0 was revised to require these inspections. General Order 24.11.1.1 was issued on October, 3, 2014

#### **Monitor's Assessment:**

A review of Interagency Directive 64.5.30.0 started prior to my previous visit is virtually complete and is expected to be submitted to the Lexipol policy and procedure staff for approval shortly following this tour. The Fire Safety Committee continues to provide summaries of its meetings. Prior to the tour the Monitor reviewed the meeting summaries from March 17, April 8, and May 19, 2016. The Monitor met with the Committee during the tour to review compliance with the fire and life safety provisions and discussed the fire drill assessments fire investigations, and emergency key system improvements. Cermak is once again actively participating in the Committee.

Previously CCDOC provided correspondence dated January 11, 2016 for the annual review and acceptance of CCDOC's fire evacuation and emergency plans and the most recent inspection completed by the Chicago Fire Department.

The Fire Safety Committee continues its formal reviews of all fire investigations. The reviews have resulted in several improvements to eliminate ignition sources as noted in the previous report. For example DFM is currently encasing the televisions including the cords and the outlets to prevent inmates from using them to create sparks that are used to create wicks. While there will always be recommendations to continue improving the fire safety and prevention system, the provision continues to be in substantial compliance. Many of the changes that will be noted in other sections of this report are the result of work of the Fire Safety Committee.

#### **Monitor's Recommendations:**

1. Continue investigating all fires and fire drills to identify procedural or training improvements needed.
2. Complete the revision process for the Interagency Directive for Fire Safety, Fire Emergency, and Fire Evacuation 64.5.30.0 to assure that they reflect current operations, regulations, and practice. The review needs to be completed at least every two years in accordance with the consent agreement.

**72.** CCDOC shall develop and implement an evacuation plan for inmates and staff and ensure that comprehensive fire drills are conducted every three months on each shift. CCDOC shall document these drills, including start and stop times and the number and location of inmates who were moved as part of the drills.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

Based on the correspondence referenced in Provision 71 above, division specific Fire Safety and Emergency Plans that include detailed evacuation plans are complete and have been reviewed by the Chicago Fire Department. The Interagency Fire Safety Committee reviews these plans, along with the division safety officers to assure they remain current. The Committee has implemented a division specific fire evacuation and emergency key egress box training program to assure that when officers are assigned to a specific division, they are adequately trained in that division's emergency egress key location, response and evacuation procedures.

While the Consent Agreement is not specific as to whether the drill frequency is for the entire complex or within each division, CCDOC conducts one fire drill per month on each shift that includes the movement of inmates for each division. Extinguishers are brought to the drill locations. Videos are available for all fire drills. Written reports are completed and reviewed for non-conformities and corrective action taken including retraining following the drills. This provision continues to be substantially compliant.

**Monitor's Assessment:**

The Monitor did not witness any fire drills during the tour. However, following the previous tour, CCDOC provided copies of several fire drill videos for review, along with their critique of staff performance. They also provided an analysis of drills conducted in March, April and May, 2016. The reports and analysis continue to be thorough and self-critical.

The Fire Safety Committee also reviews all fire investigations including photographs and developing corrective actions based on the review. For April and May there were 15 fires investigated: Two in Division 9; 12 in Division 10; and one in Division 11. Twelve of the fires were found to be started from wicks lit from either the television and/or outlet; one fire was the result of lighting milk cartons for cooking; and two were unknown sources. As a result of the investigations, the televisions are being encased as discussed previously in this report.

**Monitor's Recommendations:**

1. Continue to analyze fire drill videos, reports and summaries. Provide the Monitor with those each month.

**73.** DFM shall ensure that the Facility has adequate fire and life safety equipment, including installation and maintenance of fire alarms and smoke detectors in all housing areas according to applicable fire codes. Maintenance and storage areas shall be equipped with sprinklers or fire resistant enclosures in accordance with City of Chicago Fire Code (13-76-010).

**6/22/15 Concluded by Order of Judge Kendall**

**74.** DFM shall ensure that all fire and life safety equipment is properly maintained and routinely inspected. DFM shall develop and implement a program related to the testing, maintenance and inspection of the Life Safety Equipment.

**6/22/15 Concluded by Order of Judge Kendall**

**75.** CCDOC shall continue to ensure that emergency keys are appropriately marked and identifiable by touch and consistently stored in a quickly accessible location, and that staff are adequately trained in use of the emergency keys.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

The Security and Key Control Interagency Directive was issued effective January 1, 2012. It requires that each Division have a "red" emergency key access box located in the control room. That box contains the key that opens a second box containing all emergency keys for all housing unit doors. The key box is locked and has a security seal that must be broken to gain access. The policy further requires that any time the seal is broken, including during an emergency, the Watch Commander be notified, an incident report written, and an email sent to the Fire Safety Officer to replace the seal. Only a member of the Fire Safety Committee can re-seal the box.

All emergency egress keys are color coded and have a two inch glow stick attached to the key ring. Restricted keys are those specifically assigned to designated personnel with the authority of the respective division superintendent or DFM's Deputy Director/OEIV. These keys are color coded differently than the egress keys and are specifically designated keys for the library, classrooms, recreation rooms, etc. Emergency access keys for DFM shops for Divisions 2, 4, 5 and 6 are housed in the Superintendent's office in Division 6. Emergency keys for Divisions 8, 9, and 10 are housed in the Superintendent's office in Division 9. Emergency access keys for Division 11 o are maintained in the Superintendent's office there.

CCDOC, as a result of the Fire Safety Committee investigation has now installed color coded "zip ties" on each of the emergency key rings in addition to the glow sticks. The zip tie colors red, blue, white, black, green, yellow, orange, and lime green are systematically assigned for specific key and locks including cells, stairwell doors, tier doors, dorm rear doors etc. The color scheme is consistent for all Divisions, simplifying officer training. An emergency key color chart is stored in the emergency key box as an easy reminder for staff.

The Fire Safety Officer is investigating the use of the same scheme on each of the locks which should provide even quicker access.

Emergency keys are accessed during all fire drills and they are tested in the locks for the area of the drill.

#### **Monitor's Assessment:**

As discussed at the previous tour and as a result of this tour DFM has agreed to provide the access keys to their shops in each Division's emergency key box. The result will be that instead of their keys being stored in Division 6, 9 and 11, they will now be in each respective Division.

While touring Divisions the Monitor accessed the emergency keys in Divisions 6, 10 and 11. The addition of the color coded zip ties is an effective and efficient way to quickly identify the keys necessary to open a specific lock. Color coding the locks will even enhance quick accessibility in case of an emergency requiring evacuation. CCDOC has developed an Egress Key Exercise for all correction officers. It was completed in March and April, 2016. CCDOC provided the Monitor with a copy of the memo dated June 8, 2016 requiring the Division Superintendents to complete the Egress Key Exercise and demonstrate completion through signature sheets requiring each officer to sign that they have completed the exercise in the Division or area they currently work. The Monitor requested evidence the training was completed. The provision continues to be substantially compliant.

#### **Monitor's Recommendations:**

1. Provide a copy of the completed egress key signature sheets for each division once the training is completed.

**76.** CCDOC shall ensure that staff are able to manually unlock all doors (without use of the manual override in the event of an emergency in which the manual override is broken), including in the event of a power outage or smoke buildup where visual examination of keys is generally impossible. CCDOC shall conduct and document random audits to test staff proficiency in performing this task on all shifts, at a minimum of three times per year. CCDOC shall conduct regular security inspections of all locking mechanisms. CCDOC shall communicate with DFM via the Work Order System regarding lock-related issues and maintenance.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

Emergency keys for each division are stored in a secure control room. All keys are color coded and each ring has a glow stick attached that allows staff to easily identify a specific key in the case where vision may be impaired because of smoke, fire or loss of lighting. The Fire Safety Committee explained that on every shift, the officer assigned to the unit or tier inspects all locking mechanisms and reports any issues through the DFM work order system. The Fire Safety Committee reviews the damaged lock work order log each month. They have also implemented an "Egress Key Exercise for each Division on all shifts by all personnel. Egress key accessibility and process are also included as part of the routine unannounced fire drills as described above. The provision continues to be substantially compliant.

**Monitor's Assessment:**

CCDOC provided a "Damaged Lock Work Order Log" for March -May, 2016 along with a trend report showing that the number of damaged locks has been reduced by 35% from 57 in February to 37 in May. Also a trend report was provided that demonstrated that the average number of days from submission to closure of work orders from damaged locks decreased from 15 days in February to eight days in May.

**Monitor's Recommendations:**

1. Continue testing the egress key exercise for all divisions during fire drills.

**77.** DFM shall develop and implement an annual preventative maintenance program

concerning security devices such as doors locks, fire and smoke barrier doors, and manual unlocking mechanisms to ensure these devices function properly in the event of an emergency.

**6/22/15 Concluded by Order of Judge Kendall**

**78.** CCDOC shall implement competency-based testing for staff regarding fire and emergency procedures.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

Interagency Directive 64.5.30.0, Fire Safety, Fire Emergency, And Fire Evacuation requires training of sanitation/safety officers at least annually by or with the approval of the Bureau of Training and Education. CCDOC General Order 24.11.1.0 likewise establishes 4-hour annual training of safety/sanitation officers. CCDOC through the Interagency Fire Safety Committee has implemented the competency based safety officer proficiency examination for all safety/sanitation officers. There are currently two versions of the test that can be alternated between classes or trainings. The Directive specifically requires fire safety orientation for correction officers during the annual training program in accordance with the current CCDOC General Order. CCDOC has issued division specific Orientation Handbooks for newly assigned officers. It is the responsibility for all CCDOC staff to fully understand expectations and responsibilities for a variety of fire safety and sanitation topics. It includes sections on Safety and Sanitation Inspections of Living Units (General Order #24.9.9.0), Fire Safety (Interagency Directive 64.5.30.0), Egress Keys, Chain of Command, Inmate Count Procedures, and Compound Lockdown Levels. Each division has a unique written test for officers to complete after reviewing the divisional handbook.

**Monitor's Assessment:**

The competency based fire and emergency evacuation safety officer proficiency exam was initiated in August, 2011. At this tour CCDOC stated that 2016 safety/sanitation officer training was completed in April. CCDOC increased the passing score from 80% to 90%. With one exception all passed the written test. CCDOC provided the sign-in sheets for the training. It demonstrates that there is a minimum of one trained safety/sanitation officer on every shift for each occupied Division. In most cases there are several on each shift. CCDOC provided the Monitor with Power Point presentations for "Fire Safety Training for Supervisors", and "Fire Safety Training" for staff. The presentations are thorough, well organized, and follow the provisions of the General Order for Fire Safety. The provision is substantially compliant.



**Monitor's Recommendations:**

1. Review the latest draft of 64.5.30.0 Fire Safety, Fire Emergency, and Fire Evacuation Procedure to assure that the requirements for training for CCDOC staff is included. It is for Cermak and DFM.

**79.** CCDOC shall promptly notify DFM of all electrical hazards, including maintenance and repair of electrical outlets, devices, and exposed electrical wires.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE****Status Update:**

CCDOC maintains written procedures for prompt submittal of requests for all work orders requiring maintenance, including electrical hazards. Specifically for electrical hazards, both DFM and CCDOC monitor and review the backlog weekly. CCDOC is fully integrated with the DFM "Facility Wizard" work order system.

**Monitor's Assessment:**

There is no change from the previous report. During this tour, the Monitor toured the Central Kitchen, housing units in Divisions 4, 6, 10 and 11. Once again no electrical hazards were observed. Since the replacement lighting project, the number of work orders for exposed wires and broken fixtures has dropped significantly primarily because inmates can no longer access the wires in the fixtures. Recent fire investigations identified inmates were using the aluminum foil lids from applesauce containers to create a spark from plugs serving televisions in the housing units. Applesauce has been removed from the menu. DFM based on priority from CCDOC is now encasing the televisions, electrical cord and the outlet to prevent inmates from being able to access them to create a spark. The Monitor observed the new encasement in Division 10 on this tour. The provision is substantially compliant.

**Monitor's Recommendations:**

1. No further recommendations.

**80.** DFM shall promptly repair all known electrical hazards, including maintenance and repair of electrical outlets, devices, and exposed electrical wires and will document repairs by the Work

Order System.

**6/22/15 Concluded by Order of Judge Kendall**

**81.** CCDOC shall ensure that combustibles are controlled and eliminate highly flammable materials throughout the facility and inmate living areas (e.g., inmates' use of paper bags as trash receptacles, ripped fire-retardant mattress covers, improvised cell light covers, blankets on cell floors, and improperly stored and labeled flammable liquids and other chemicals

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

General Order 24.11.1.1 "Sanitation, Fire Health and Life Safety Plans and Reporting" is the CCDOC Master Sanitation Plan. Division specific sanitation plans are revised as appropriate to the General Order. The replacement program for new lighting fixtures has also eliminated the incandescent bulbs inmates used to block light.

Inmates are required to maintain all personal belongings and commissary in their personal property bags. Inmates housed in cells are permitted one paper bag per person for trash from commissary that is required to be emptied daily. CCDOC is currently piloting the elimination of paper bags entirely.

CCDOC has developed a "Combustible Material Awareness" PowerPoint presentation to train correction officers that includes photographs of combustibles found during fire investigations.

DFM controls the storage of flammables in their shops by maintaining them in designated secure fire resistant cabinets. As discussed in Provision 73, DFM has completed the color-coded map and inventory of all flammable and hazardous chemicals and provided it to CCDOC division safety officers and Safety Administrator. So within each division, there is an up-to-date inventory of all flammables being stored in that specific division. The inventory is maintained by DFM and is readily available to first responders in case of an emergency.

**Monitor's Assessment:**

The Monitor toured housing units in Divisions 4, 6, 10, and 11. Housekeeping in Division 4 was significantly improved since the previous visit. In Division 6 inmates were not keeping personal goods and commissary in their personal property bags. In Division 11 CCDOC is experimenting with not allowing any paper bags in the cells. The paper bags come to the inmates with commissary. Inmates did not complain about the lack of bags. Of the 15 fires investigated, none involved the use of paper bags as fuel. In all Divisions visited, the Monitor did not observe

any torn or damaged mattresses. Consistent enforcement from tier officers and supervisors to limit the amount of flammable materials within the cells continues to be a key to assure the expectations are met. Additionally Superintendents and Assistant Executive Directors need to be more vigilant when touring housing units. That said, the lighting replacement project that eliminated incandescent bulbs and exposed wiring, the elimination of Styrofoam trays, and monitoring the flammables in the cells are all examples of steps taken by CCDOC to reduce the risk of fires.

The provision remains substantially compliant.

**Monitor's Recommendations:**

1. Continue enforcement by the tier officer and supervisors to allow one paper bag per cell. All bags in excess should be confiscated including those received with commissary. In dormitories, there should be no paper bags allowed, as trash containers are already provided. All other personal items including shoes, commissary, correspondence, books, and magazines must be required to be stored in the inmate's personal property bag.

**82.** CCDOC shall ensure that fire safety officers are trained in fire safety and have knowledge in basic housekeeping, emergency preparedness, basic applicable codes, and use of fire extinguishers and other emergency equipment.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

The Interagency Directive for Fire Safety, Fire Emergency, and Fire Evacuation, 64.5.30.0, was authorized effective August, 2011. The policy establishes that all CCDOC employees must receive training and become well-versed in the fire safety, emergency, and evacuation plans of the department and its divisions. This includes safety/sanitation officers. (Note: In the divisions there are designated and trained "Safety/Sanitation Officers" that are equivalent to the term "fire safety officers" identified in the provision requirement above.) Further, the policy explains that "Communication among and between CCDOC, Cermak, and CCDFM employees is key in assuring a safe facility, and all shall work together to implement this directive."

The Interagency Directive requires the designation and training for all CCDOC divisional safety/sanitation officers for each division at least annually. The training must be provided by or with the approval of the Cook County Sheriff's Office Training Institute, through the CCDOC

Safety Office and the Chicago Fire Department, and in accordance with a written course syllabus to be reviewed annually by the Fire Safety Committee.

The training of safety/sanitation officers is currently provided by the CCDOC designated Safety Administrator, using the video of one of the courses previously provided by the Chicago Fire Department. Following the training, safety officers are required to pass a written proficiency examination. CCDOC has also developed a “Fire Extinguisher Training” PowerPoint that is thorough tutorial on the types of extinguishers, operation, and firefighting rules.

#### **Monitor’s Assessment:**

Training of annual safety/sanitation officers for 2016 was completed in April. Classes were held on April 14, 21 (two classes). The records submitted showed a class on December 21 & 22, 15., and CCDOC provide copies of sign-in sheets, along with a list demonstrating that there are safety/sanitation officers on every shift in every Division housing inmates. The list also shows assigned safety/sanitation officers for the laundry, kitchen, DFM, and Cermak infirmary. CCDOC provided a copy of the Power Point training program used for Safety/Sanitation Officers and Supervisor assigned to each Division. This is in addition to their divisional safety manuals that were issued prior to the previous tour. This provision continues to be in substantial compliance.

CCDOC should include in the revision to Interagency General Order 64.5.30.0 a provision requiring the list of trained Safety/Sanitation Officers by Division that demonstrates that there is at least one Safety/Sanitation officer in every shift. The list needs to be reviewed at least once every three months because of officers bidding new posts. The logical person responsible for maintaining the list is most likely the Fire Safety Coordinator.

#### **Monitor’s Recommendations:**

1. Include a provision in the Fire Safety, Fire Emergency and Fire Evacuation Procedure to assure CCDOC maintains a current list of all trained Safety Officers by Division and by shift.
2. Should a Safety Officer be transferred or leave CCDOC, the superintendent, prior to the transfer or leave shall provide the name of the replacement Safety Officer to the Fire Safety Coordinator.

#### **PROVISION: G. SANITATION AND ENVIRONMENTAL CONDITIONS**

##### **83. Sanitation and Maintenance of Facilities**

- a. DFM shall maintain an adequate written staffing plan and sufficient staffing levels to provide for adequate maintenance of the Facility.

**83. Sanitation and Maintenance of Facilities**

**b.** CCDOC shall revise and implement written housekeeping and sanitation plans to ensure the proper routine cleaning of housing, shower, and medical areas, in accordance with generally accepted correctional standards. Such policies should include oversight and supervision, including meaningful inspection processes and documentation, as well as establish routine cleaning requirements for toilets, showers, and housing units.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

CCDOC General Order 24.11.1.0, Divisional Sanitation Plan became effective in February, 2012 and was revised to CCDOC General Order 24.11.1.1, "Sanitation, Fire, Health, and Life Safety Plans and Reporting." This order is a companion order with General Order 24.9.9.0, Safety and Sanitation of Living Units which became effective December, 2011 and currently is under revision. Both Order revisions reflect improved practice and include specific sanitation schedules for all housing and common areas of the divisions and require documented housekeeping completion logs, inspection reports, deficiency plan for corrective action and requisition procedures for cleaning supplies.

Division designated safety/sanitation officers for each division has are trained by the CCDOC Sanitarians on safe and effective cleaning and disinfecting procedures. In the General Order, Watch Commanders are responsible for reviewing the completed Daily Inspection Forms from each of the living units and submitting a weekly summary report. The Support Services Superintendent and Sanitarians receive and review the weekly summary of the sanitation log from each of the divisions. The divisional sanitation plans mandate that safety/sanitation officers observe the cleaning and disinfection of cells, dayrooms, toilets and shower facilities. Since the divisional sanitation plans became effective, the Sanitarians continue to conduct unannounced inspections of living units within all divisions.

CCDOC implemented an incentive for housing unit cleanliness and order by providing microwave ovens to those living units where the rules are being followed. This process established accountability from both inmates and officers to improve and maintain the level of cleanliness and order of the living units as well as common areas including classrooms, maintenance closets, and tunnels. Improvement in cleanliness in those housing units where

microwaves had been provided is generally significant when compared to those units where they are not available.

Cermak Environmental Services has developed a written policy with input from CCDOC that establishes procedures for cleaning and disinfection of all areas for medical and mental health inmates and each of the division specific dispensaries. Its purpose as stated is to, "To ensure through collaborative departmental efforts of sanitation, prevention, maintenance, and education that all areas under Cermak Health Services" (CHS) authority shall be maintained clean, disinfected, well organized, and in good repair." It establishes formal housekeeping procedures, schedule, and expectations for the building service workers responsible for completing the all cleaning and disinfection. It includes a weekly "monitoring" program conducted by building services supervisors to be submitted to the Environmental Services Director. Environmental Services has provided training of the building service workers and supervisors.

Cermak has also instituted "environmental rounds" done weekly and over the course of a month assess all divisional clinics, the infirmary and emergency room.

The housekeeping policy requires daily inspections completed by the tier officer on each shift. The form requires the deputy to note any issues including the need for work orders, cleanliness issues, etc.

#### **Monitor's Assessment:**

Prior to the tour CCDOC provided three months of daily housing tier inspection reports. Most were incomplete and identified few, if any issues. The Monitor questioned the value of the inspection and suggested that they appear to add no value or information that would be useful to management or even the deputy working on the following shift. Upon questioning commanders, superintendents, and Assistant Executive Directors none stated that they regularly reviewed the reports further suggesting they have no value to their operation. The Monitor suggested they be stopped and a process of conducting inspections that will benefit supervisors and management be developed, training provided and authorized.

For this tour the Monitor assessed housing units in Divisions 4, 6, 10, and 11. The housing tiers in all Divisions visited were maintained clean with the exception of Division 6. There, cells had considerable commissary, personal supplies not stored in the personal storage bags. Ropes used to hang clothing and rags around the cell were found in most cells of the housing units visited. Excess commissary exposed food were observed in many cells most likely contributing to the rodent problem discussed later in this report. Several cells had more than one paper bag

per inmate as allowed. Inmates maintained excess books, magazines more than specified in the inmate handbook.

Several inmates housed In Division 10 tiers visited maintained extra unauthorized property bags which were made from towels that were stitched with bed sheet material. This is the only Division where these bags were permitted or observed on the tour. The Monitor suggests CCDOC review the issue and either eliminate them or change the policy and inmate handbook accordingly. This may be one reason inmates in other housing units complain that when they move, they do not get their personal goods. Consistency is needed.

The inmate showers in all Divisions visited were clean; clearly the frequent use of the power washing equipment that was purchased for each division has had a positive outcome. In Division 11 the Monitor observed excess peeling paint on the shower walls and floors of virtually every shower in both pods visited. This may be the result of excessive pressure from the power washers. The Monitor suggests that the process be reviewed to assure safe and effective use of the equipment. Clearly all the showers need to be repaired and repainted. It is interesting to note that in all cases work orders for repainting had been submitted, but no one in the Division or the Assistant Executive Director had investigated to find out why the paint was peeling from the wall and floor surface.

The Monitor also noted that in pod BA of Division 11, inmates had ready access to a large white bucket lined with a clear plastic garbage container and containing ice and water with a broken plastic drinking water cup submerged in the container. When questioning a deputy who stated he had been there for almost three months stated he had never seen this before. At least eight inmates in different cells all stated the bucket and ice water were there every day. This practice clearly has public health significance to the inmates. Hands from numerous inmates dipping into the glass to fill drinking water cups, lack of a cleaning and disinfection procedure for the container, question about from where the water was provided. If iced drinking water is going to be provided to inmates, a dispensing cooler that is cleaned and disinfected in the Division 11 kitchen should be the minimally accepted practice.

The provision is substantially compliant.

**Monitor's Recommendations:**

1. Continue to enforce sanitary housekeeping practices in the housing units. Assure supervisors are requiring compliance from the officers. To expect inmates to comply with inmate rules when enforcement by deputies, supervisors, commanders, superintendents, and Assistant Executive Directors is not practical and fair for all.

2. Review the housing unit inspection process to develop one that adds value to the Divisions and that provides for both documented correction and corrective action.
3. Assess the need for additional bags for inmates to store shower towels, shoes, shampoo etc. and assure that whatever you choose is consistent within all Divisions. The type, number and use of personal property bags needs to be consistent throughout all Divisions.
4. Review the need for providing additional drinking water sources within the housing units, and if provided assure there is a process for rotating dispensing coolers that include a process to clean and disinfect between uses.

### **83. Sanitation and Maintenance of Facilities**

c. DFM shall implement a preventive maintenance plan to respond to routine and emergency maintenance needs, including ensuring that shower, toilet and sink units are adequately maintained and installed.

#### **1. 6/22/15 Concluded by Order Judge**

### **83. Sanitation and Maintenance of Facilities**

d. CCDOC shall notify DFM, in a timely manner, of routine and emergency maintenance needs, including plumbing, lighting, and ventilation problems.

### **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:** The DFM “Facility Wizard” work order tracking system interface has been operational at both CCDOC and Cermak since April, 2012. As stated in the previous report DFM is in the process of replacing it with a new work order management system that will be completed by year-end.

General Order 24.9.9.0 established an inspection protocol for designated officers in each Division to initiate work order requests. The food service contractor has access to submit work order requests through Support Services staff. The CCDOC Sanitarians can also submit work order requests. The Sanitarians have also created a Power Point presentation for training living unit officers demonstrating what constitutes a needed plumbing, electrical and emergency issues.

As a result, work orders from CCDOC staff can be submitted as soon as they identify issues. The use of the 24 hour hotline for emergency repairs assures that emergency maintenance repairs are forwarded to appropriate DFM trades to quickly respond to these typically within minutes.



**Monitor's Assessment:**

The Monitor noted that when plumbing issues were observed during the tour, in virtually every case, the safety/sanitation officer or Commander was able to demonstrate that a work order had been previously submitted to DFM. Each division maintains a spreadsheet listing the outstanding work orders. The spreadsheet is updated at least weekly. Universally, housing officers and supervisors stated they are pleased with the timely response from DFM to complete repairs. DFM also provided a trending chart demonstrating that the number of work orders not completed within 30 days is significantly reduced in the last 18 months. For example open plumbing work orders dropped from 117 to 25; electrical work orders had dropped from 29 to 8. The primary reason that the list is not even shorter is because of delays in procurement of parts.

The provision continues to be in substantial compliance.

**Monitor's Recommendations:**

1. No further recommendations.

**83. Sanitation and Maintenance of Facilities**

- e. DFM shall ensure adequate ventilation throughout the Facility to ensure that inmates receive an adequate supply of air flow and reasonable levels of heating and cooling. DFM staff shall review and assess compliance with this requirement on a daily basis for automated systems and on an annual basis for non-automated systems.

**6/22/15 Concluded by Order Judge Kendall**

**83. Sanitation and Maintenance of Facilities**

- f. CCDOC shall notify DFM of any visible obstructions to the ventilation system.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

As discussed above, DFM staff clean and/or replace blocked or dirty vents based on CCDOC staff submitting work orders. When tier officers identify blocked vents, a work order is submitted to DFM through the work order system.

**Monitor's Assessment:**

The Monitor did not observe any blocked vents. CCDOC eliminated use of Styrofoam trays from meals that were being used to block air movement in the cells. Tier officers appear to be vigilant anytime inmates try to plug vents with toothpaste or toilet paper. While inmates have the ability to request hygiene supplies such as toothpaste, the packets provided do not provide enough paste to significantly block air vents. Blocked vents are no longer an issue within any CCDOC division. This provision continues to be in substantial compliance.

**Monitor's Recommendations:**

1. No further recommendations.

**83. Sanitation and Maintenance of Facilities**

**g.** Cook County shall ensure adequate lighting in all inmate housing and work areas.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

DFM maintains the responsibility for assuring adequate lighting throughout the CCDOC complex. In 2013 they completed a capital project to replace or retrofit all lighting with secure fixtures that would prevent inmate abuse and improve energy efficiency within the living units within all divisions. Lighting in housing and work areas is no longer an issue within any inmate housing units within CCDOC. All fixtures requiring the use of unprotected Incandescent bulbs are no longer used in inmate cells.

**Monitor's Assessment:**

There is no change from the previous report. According to CCDOC staff there has been very few issues with lighting. This provision continues to be in substantial compliance.

**Monitor's Recommendation:**

1. No further recommendations.

**83. Sanitation and Maintenance of Facilities**

**h.** CCDOC shall ensure adequate pest control throughout the housing units, medical units, RCDC, RTU, and food storage areas. CCDOC shall maintain a contract for professional exterminator services for each division, food services areas, and the Cermak hospital. Services should provide for routine pest control spraying and

additional spraying as needed.

## **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

### **Status Update:**

CCDOC maintains a contract for pest control services for all facilities with the exception of Cermak. Cermak maintains a separate contract their facility. The contract requires the pest control technician be onsite 5.5 hours per day. The current contractor provides CCDOC a map showing the location of all traps, and completes comprehensive inspection following an “Integrated Pest Management” approach. The contractor is required to complete a floor drain cleaning procedure a minimum of twice per year to prevent insect eggs and larvae from developing, and provide a 24 hour response time for complaint response. They provide a quarterly trend reports, tracking insect and rodent activity for all divisions, along with electronic reports of their inspections and any recommendations for improved sanitation and/or maintenance repairs.

CCDOC maintains a “pest control hotline” for officers to report any pest activity. Steps to prevent pest issues and infestations are reinforced at the training academy for all correction officers.

### **Monitor’s Assessment:**

CCDOC provided a copy of Pest Identification summary for the first quarter of 2016, along with the trend analysis completed by the CCDOC Sanitarian. The report includes a monthly list and a quarterly summery spreadsheets showing by division the number of pest catches including mice, three types of cockroaches, ants, fruit flies, drain flies, gnats and silverfish. They also provided pie charts showing both interior and exterior catches for rodents. For example the most recent report noted that of the 79 mice caught 56% were caught in external traps. The areas that have the most significant rodent activity are Division 6 and 11. Ants appear to be a significant issue in Division 2 dorm 3, Division 4, and Division 10. German cockroaches are a problem in Division 2 dorm 3, Division 10 and Division 11 kitchen. The Monitor suggests that the trend analysis and summary should be expanded to 12 to 18 months to provide CCDOC management with data over a longer time. That information would be far more useful to demonstrate improvement or identify areas where modifications to the pest plan are needed.

Touring the divisions’ inmates in Division 6 complained about mice in several housing units. The women in Division 4 complained only in tier P-1. The Monitor suggests that in those housing units where inmates are complaining or pest monthly reports show several issues, the reports be more comprehensive to show the specific tiers where activity is most prevalent and

identify the adjacent tier where external catches occur. It should also include pest control's recommendations to prevent and eliminate pests. This would provide the Sanitarians with much better data to conduct comprehensive inspections to identify both the access points and the cause of the problem such as excess exposed food, poor housekeeping and allow for effective corrective action. This same enhanced reporting should also be used where excessive insects are used.

The Monitor noted that while walking around the outside of Division 6 there were several rodent traps left from the previous contractor and are no longer useful. They need to be removed.

The pest control report provided at each visit needs to provide a more comprehensive report that shows specifically which traps were checked on each visit. Externally to Division 6 the Monitor identified traps that were covered with excessive weed growth possibly indicating that those traps had not been checked in some time. CCDOC needs to be assured that the contractor is following the contract and providing the service expected. The Monitor also noted that in the reports there are not many recommendations to CCDOC to address harborage issues that would eliminate sources of food, water, or shelter. For example the flooded water supply faucet outside Division 6 that also created a submerged inlet and cross connection, along with the unapproved hoses being used to provide drinking water to inmates at outdoor recreation. The potable water approved hoses were purchased the next day. A work order was submitted to repair and relocate the faucet in a protected manner.

Within Division 6 housing units toured where inmates complained about rodent issues, inmates appeared to be permitted by deputies to maintain excess food from meals, not securing commissary in the personal property bag. Enforcement of inmate rules needs to be significantly improved and consistently monitored.

In summary, while the provision remains "substantially compliant" the Monitor suggests that CCDOC address specific areas where several complaints from either inmates or staff are received. It would be helpful if supervisors, commanders, superintendents, assistant executive directors would ask inmates about pest activity when visiting tiers. The Monitor also suggests that CCDOC Sanitarians obtain an aerosol "flushing agent" such as "Mr. Inspector" to be able to quickly respond and verify insect activity such as ants or cockroaches.

CCDOC should track and document inmate complaints from the hot line to monitor trend activity and make sure areas of concern are quickly and effectively treated. The Sanitarians did meet with the Contractor during the week to address findings.

#### **Monitor's Recommendations:**

1. Document the pest control summary and trend analysis over a longer period such as 12-18 months to provide useful data to measure performance by Divisions and by pest.
2. Document and track pest complaints from the hotline by Division and tier.
3. Review with the pest control contractor the need for a more comprehensive report identifying the specific areas within Divisions where pest activity is increasing.
4. Obtain and use pest flushing aerosol to be able to quickly verify insect activity in housing units so the contractor can more effectively treat as needed.

### 83. Sanitation and Maintenance of Facilities

- i. CCDOC shall ensure that all inmates have access to needed hygiene supplies.

#### **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

##### **Status Update:**

CCDOC implemented General Order 24.11.6 with an effective date of March, 2014. It requires that upon intake, employees shall issue inmate basic hygiene supplies including soap, toothpaste, toothbrushes, and as appropriate sanitary pads. Weekly, the safety/sanitation officer makes rounds to each housing unit to replenish inmate supplies of tooth brushes, toothpaste, and toilet paper as needed. Inmates needing additional supplies during the week only need to notify the housing unit officer on any shift. CCDOC maintain the logs, which will eventually be electronic so they can monitor excess hoarding of supplies. The logs demonstrate that the inmate received needed supplies.

##### **Monitor's Assessment:**

CCDOC Compliance Team has completed a formal audit of the Inmate Hygiene Policy. The audit revealed that the officers were distributing hygiene supplies (toilet paper, soap, and toothpaste) every week to all inmates whether or not the inmate needed them. This was not the intent of the procedure. As a result, the Divisions were not able to maintain an adequate supply of replacement items as specified in the policy (One and one half times the number of inmates housed there.) The Monitor observed excessive soap (potential weapon) in many cells and some cells with excessive toilet paper. Upon questioning inmates, the Monitor received no complaints or saw any grievances about not being able to receive supplies. As a result, the provision remains substantially compliant. However, CCDOC needs to clarify the policy to reflect the intent and provide training on the correct procedure.

##### **Monitor's Recommendations:**

1. Review and amend the inmate hygiene policy and procedure and provide necessary training.

### **83. Sanitation and Maintenance of Facilities**

j. CCDOC shall develop and implement policies and procedures for cleaning, handling, storing, and disposing of biohazardous materials, in accordance with generally accepted correction standards. CCDOC shall ensure that any inmate or staff utilized to clean a biohazardous area are properly trained in universal precautions, are outfitted with protective materials, and receive proper supervision when cleaning a biohazardous area.

#### **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

##### **Status Update:**

Biohazardous waste from Cermak's medical facility and the medical and/or dental clinics in the divisions is the responsibility of Cermak, not CCDOC. Biohazardous waste in Cermak is securely stored and placed in red bags for daily pick up by designated Cermak staff. Cermak maintains a contract for collection and final disposal of the waste.

For biohazardous waste from living units or laundry, each division maintains a supply of biohazardous spill kits within the security office and the sanitation supply rooms. They are replaced as needed through Support Services. CCDOC policy does not permit inmates to clean bio-hazardous spills. A new blood-borne Pathogen Decontamination General Order was issued in January, 2013. Support Services Sanitarian created a Power Point training presentation for biohazardous waste handling and cleanup that is now provided to all sanitation officers. There is a written syllabus for blood-borne Pathogen clean-up training. Cermak teaches the blood-borne pathogen training at the Academy and during in-service.

##### **Monitor's Assessment:**

There is no change from the previous report. The Monitor observed the supply of spill kits in the sanitation room of Division 4, 6 and 11. The kits include personal protective equipment (PPE) for response staff as well as clean-up supplies. The warehouse maintains a supplemental supply to replenish the divisional supplies. CCDOC staff has trained all safety/sanitation officers on all shifts the safe response procedures.

##### **Monitor's Recommendations:**

1. No further recommendations.

### **83. Sanitation and Maintenance of Facilities**

**k.** DFM shall develop a policy on hazardous materials, in accordance with generally accepted correctional standards, and insure that all DFM staff is properly trained on the procedure.

**6/22/15 Concluded by Order of Judge Kendall**

### **83. Sanitation and Maintenance of Facilities**

**l.** CCDOC shall provide and ensure the use of cleaning chemicals that sufficiently destroy the pathogens and organisms in biohazard spills.

#### **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

##### **Status Update:**

CCDOC dilutes concentrated chemicals following the chemical manufacturer's specifications from the central supply room located in Division 5 and distributes them daily to the Divisions as requested. By centrally controlling the dilution and following the chemical manufacturer's directions, the Divisions only receive properly diluted cleaning and disinfecting chemicals needed for routine cleaning and sanitizing of floors, toilets, lavatories, showers, etc. and effective cleaning and sanitizing surfaces from biohazard spills.

The chemicals include a general purpose cleaner, disinfectant, glass cleaner; stainless-steel cleaner, deodorizer, and bleach along with a supply of labeled spray bottles and labels. Only the designated floor care team has access to the cleaning chemicals used for floor care including floor stripper, floor wax, floor cleaner, and floor sanitizer. Also available from the CCDOC warehouse are mop heads, mop sticks, vacuum, power washer brooms, dust pans and squeegees, along with buckets brushes, Tyvec suits, vinyl gloves, garbage bags and eyewash stations.

Training for inmates and CCDOC sanitation officers on the safe and effective use of cleaning is taught by the Sanitarians. Training is provided to inmate workers assigned the responsibility of cleaning cells, showers, toilet facilities, dayrooms, classrooms, tunnels, and all administrative areas. These are two-hour classes daily, for one week. Each person that takes the class and successfully passes a written test is presented with a certificate of completion.

Inmates are provided only diluted chemicals from the inmate sanitation worker to clean their respective cell sinks, toilets, and floors. "Sanitation kits" have been distributed to each living unit to be used for inmate mattress cleaning and daily cleaning done by inmates. The crates

include one spray bottle of general purpose cleaner, a spray bottle of disinfectant, two brushes (one for touch surfaces and one for toilets), four rags and an instruction card. Kits are now included in the count clearing process and the tier officer is responsible to assure inmates do not misuse the chemicals. The safety/sanitation officer on the 11pm to 7am shift is responsible to collect and restock the kits to the tiers.

**Monitor's Assessment:**

There has been no change since the previous report. This provision continues to be substantially compliant.

**Monitor's Recommendations:**

1. No further recommendations.

**83. Sanitation and Maintenance of Facilities**

**m.** CCDOC shall inspect and replace as often as needed all frayed and cracked mattresses. CCDOC shall destroy any mattress that cannot be sanitized sufficiently to kill any possible bacteria. CCDOC shall ensure that mattresses are properly sanitized between uses.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

Mattresses are replaced as needed throughout the divisions when they become no longer cleanable or beyond repair. Each division maintains a small surplus of mattresses and more are available from Central Supply, if needed. If medically ordered, Inmates in Cermak may be provided pillows and pillowcases or an extra mattress. Each division has a designated clothing and bedding storeroom and has established written procedures to inspect, clean, disinfect, and repair or replace mattresses before they are provided to incoming inmates. The room has designated areas for separate storage of clean and soiled mattresses. The mattress is removed from the cell when an inmate is moved or discharged and taken to the designated storeroom within the respective division, inspected for damage, and if found acceptable cleaned and disinfected. A trained inmate worker supervised by the storeroom deputy is used. The mattress is allowed air-dry and returned to the cell or dormitory for use or stored until needed by the tier. Inmates are also permitted clean their mattress during scheduled daily cleaning utilizing the sanitation kits described above.



Hospital mattresses within Cermak are cleaned and disinfected within the cell or dormitory anytime an inmate is transferred or discharged. Cermak's sanitation policy, formally establishes the procedure for cleaning and disinfecting them.

**Monitor's Assessment:**

On this tour, the Monitor did not identify any mattresses in need of repair or replacement. All mattresses observed were well maintained with no tears or excessive wear. The Monitor did not receive any complaints from inmates regarding mattress issues. Staff reported the warehouse maintains an adequate supply of replacement mattresses.

**Monitor's Recommendations:**

1. No further recommendations.

**83. Sanitation and Maintenance of Facilities**

n. CCDOC shall ensure adequate control and observation of all housing units, including distribution and collection of razors and cleaning supplies. All cleaning tools and hazardous chemical shall be removed from housing areas after use.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

CCDOC has established General Order 24.11.7.0, Inmate Razor Distribution Effective March, 2014. Razors used throughout CCDOC are color coded by division. The CCDOC Assistant Executive Director (AED) of Special Projects is responsible for maintaining inventory of inmate disposable razors and assigning designated staff to issue razors to each division. Each division's Watch Commander is required to assure accuracy of the inventory and designate employees on each shift to verify the number of disposable razors on hand before distribution and upon their return from the inmates. Divisions are issued two biohazard waste containers with disposable plastic liners; one used to transport unused razors and one for collecting and returning used razors. The date and amount of razors are tracked in a "Disposable Razor Logbook" signed by the officer accepting the razors. Used razors are placed in the red biohazard container designated for "used" razors and returned to the AED for Special Projects' office for safe disposal. No razors are maintained in the housing tiers or dormitories. All razors, used and unused, are audited daily to assure complete retrieval. If a discrepancy is identified, an incident report is generated. Razors are available for use by inmates on the 11pm to 7am shift Monday through Friday with the exception of holidays.

**Monitor's Assessment:**

The Monitor reviewed the missing detainee razor blades report for March, April and May, 2016. There were seven incidents reported. All were investigated and incident reports and administrative assessments completed.

Upon review the Monitor noted that two of the incidents needed further management review for two different reasons. One specific incident involved 36 missing razor blades from Division 6. The incident report was completed and submitted upon discovery as required. The Superintendent subsequently provided a separate memo to the management staff stating the process implemented to locate the missing razors. Unfortunately the report also dated April 12, 2016 was not conclusive as to whether the razors were actually located. It did identify errors made by the assigned shift commander in not verifying the count when the replacement razors were added to the inventory, but signed the report anyway. The Superintendent should have provided a follow-up report stating whether the razors had been found or that the replacement razors were never added to the inventory. Based on what was provided, the incident remains open.

The second incident involved four missing razors in Division 9 on March 25. The written administrative assessment noted that during a count of razors of the relieving 3-11 shift, four razors were missing. However the razors had not been distributed to inmates. What is concerning to the Monitor was that the corrective action involved changing the process of counting the blades stating, "Therefore razors will be counted with a sergeant or above" (going forward-emphasis added). If that is a change to the procedure included in the policy, the policy will need to be changed to reflect the process so that it is consistent in all Divisions. If not, the incident report administrative assessment should have stated merely that the policy would be followed as written going forward. This may be an example of staff making unauthorized changes to a procedure without management review. Incident reports were completed for both. These isolated instances are not at this point considered a systemic issue considering the number of times in a three month time frame razors are issued. Consider this an opportunity for improvement. The provision continues to be in substantial compliance.

**Monitor's Recommendations:**

1. Assure all incident reports submitted are reviewed and only accepted once there is a logical conclusion that would allow closure of the incident.

**83. Sanitation and Maintenance of Facilities**

- o. CCDOC shall ensure that Facility Sanitarians receive training from a relevant state,

national, or professional association with emphasis on assessment of environmental health practices and emerging environmental issues in correctional settings. Facility Sanitarians should also have training on and access to testing equipment to ensure sanitary conditions.

#### **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

##### **Status Update:**

CCDOC employs two full time Registered Sanitarians, who report to the Superintendent of Support Services. Both Sanitarians are active participants for all areas of the consent agreement involving environmental and safety issues including chemical control, sanitation, laundry, food service, and fire and life safety. They actively participate in the review and revision of General Orders for these areas, along with developing and providing specific training programs to correction and civilian staff, and inmates. CCDOC provides them with and they regularly use measuring and testing equipment to monitor sanitation, temperatures, etc. They continue to research specific environmental issues such as pest control trends, food service, laundry, sanitation, maintenance, biohazardous materials, etc. They conduct independent sanitation audits, both for corrections and Cermak which has resulted in modification and improvements to training programs, enhanced follow up work and objective counsel with both corrections and coordinating efforts with Department of Facilities Management.

They meet regularly with the contractor for food service, pest control, division superintendents, CCDOC management, Cermak, and DFM to assess and resolve issues. As part of their inspections, they regularly speak with both inmates and staff to identify issues that need resolution. They have an integral role in the implementation and monitoring of several CCDOC policies relative to sanitation and provide direction to the divisional sanitation officers. They have trained all divisional sanitation officers on correct cleaning procedures to assure continuing effective cleaning and sanitation. CCDOC is fortunate to have selected two Sanitarians who understand institutional environmental health, along with unique correctional issues and that are able to interpret and find solutions to protect the safety and health of both inmates and fellow employees.

##### **Monitor's Assessment:**

CCDOC continues to maintain two environmental health positions. Both Sanitarians participated in the tour. They speak with inmates and assist correction officers helping them understand the public health reasons for specific policies and procedures, along with the impact of following them correctly. Their commitment and their technical and communication skills have added considerable value to solve sanitation and safety issues in the divisions. The

most senior Sanitarian attended the Illinois Environmental Health Association North Chapter Pest Invasion 2016 conference in April. This provision remains in substantial compliance.

**Monitor's Recommendations:**

1. No further recommendations.

**PROVISION: G. SANITATION AND ENVIRONMENTAL CONDITIONS**

**84. Sanitary Laundry Procedures**

a. CCDOC shall develop and implement policies and procedures for laundry procedures to protect inmates from risk of exposure to communicable disease, in accordance with generally accepted correctional standards. To limit the spread of communicable disease, CCDOC shall ensure that clothing and linens returned from off-site laundry facility are clean, sanitized, and dry.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

CCDOC operates laundries in Division 4, 5, and 9. The Division 5 laundry is the main laundry for the complex and operates on three shifts daily. The Division 4 laundry handles the female inmates housed there. The Division 9 laundry is used as a back-up in case of equipment breakdowns in Divisions 4 and 5 facilities. The food service contractor operates a separate laundry to clean inmate worker uniforms and kitchen laundry. No laundry is taken off-site.

CCDOC authorized General Order 24.11.3.0 effective March 7, 2014. It establishes the responsibilities assigned to the Laundry Unit Watch Commander and outlines the necessary training requirements for both employees and inmates assigned to the laundry units addressing safe sorting, washing, drying, and folding procedures and appropriate sanitation precautions necessary to be taken to assure that clean laundry is never cross-contaminated with soiled laundry. The Laundry Watch Commander, in turn, is responsible to train inmate workers on the procedure, sanitation, and the use of personal protective equipment (PPE).

The General Order requires all inmates to exchange soiled uniforms, towels and bed linen according to the posted schedule and strictly prohibits inmates from washing and drying clothing or linen. Personal laundry is collected from inmates twice each week on a schedule posted in each housing unit. Once cleaned, it is returned typically within the same shift from when it was collected. Living unit officers who observe clothing and linen being washed by

inmates are expected to confiscate all such items and issue clean, dry clothing and linens and initiate an Inmate Disciplinary Report.

The Central laundry in Division 5 consists of five 150-lb Unimac washers and five 170-lb Unimac dryers. The Division 4 laundry consists of one Speed Queen 40 lb. washers and one 40 lb. dryers. The kitchen has one washer and one dryer.

Laundry chemicals used in all washers, including bleach, detergent and sour, are electronically dispensed. Laundry chemicals used are currently purchased from Ecolab. They include Ecostar Builder C detergent, Ecostar Destainer (Bleach), and Ecostar Sour (a pH adjusting chemical) to prevent skin irritation and fabric browning. Safety Data Sheets (SDSs) for all laundry chemicals are posted, maintained up-to-date and readily available. At all laundries bins used to transport uniforms, linens, blankets and personal laundry to and the divisions are cleaned and disinfected with Clorox disinfecting wipes before the cleaned laundry is placed in them.

Weekly, CCDOC tracks the amount of personal clothing sent to the laundry. The reports are provided at each Superintendent's accountability meeting each week. The laundry supervisor records the amount by weight of laundry received from each division including linens, uniforms, and personal laundry.

#### **Monitor's Assessment:**

The inmate personal laundry trend report from February, 2015 through May, 2016 continues to demonstrate increasing use in all divisions. CCDOC's inmate culture for many years has been that personal clothing is often misplaced, lost, and never returned or if returned it is wet, and late and sometimes missing clothing. The use of the laundry loops has helped reassure inmates. The trend report shows inmates have more confidence in their personal clothing being returned clean, dry and on schedule. On this tour the Monitor heard complaints from inmates that on the previous day personal laundry was not collected. Tier logs maintained on the tier could not confirm that laundry had been collected. CCDOC needs to remind tier officers and the supervisors to accurately record the time the laundry was collected and the time it was returned. CCDOC compliance team will be including this in their audits of the laundry process.

The replacement of the washer and dryer for Division IV is expected to be completed this week. All the plumbing changes and ventilation work has been completed. This provision continues to be in substantial compliance.

#### **Monitor's Recommendations:**

1. Assure that tier officers record the time personal laundry is collected in every tier and the time that laundry is returned to the inmate.

#### **84. Sanitary Laundry Procedures**

**b.** CCDOC shall ensure that inmates are provided adequate clean clothing, underclothing and bedding, consistent with generally accepted correctional standards, and that the laundry exchange schedule provides consistent distribution and pickup service to all housing areas

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

##### **Status Update:**

CCDOC General Order 24.11.3.0 prohibits inmates from washing and drying uniforms, towels personal clothing or bed linens other than through the CCDOC's laundries. It requires Living Unit Officers to confiscate clothing or linens being washed by inmates and issuance of clean, dry clothing and/or linen and issuance of an Inmate Disciplinary Report.

The policy and practice require uniform, and towel be exchanged twice each week, sheets once per week and blankets exchanged once per month. Personal clothing is collected twice per week from all housing units and is returned the same day and typically on the shift from which it was collected. A laundry schedule is posted in each living unit, and each division is required to include in its weekly Summary Report specifically which living units did not receive linen exchange as required by the policy. All laundry is washed using electronically dispensed detergent. White clothing also is washed with bleach. All clothing, linens and blankets are thoroughly dried at a high temperature.

##### **Monitor's Assessment:**

The Monitor observed the posted laundry schedule in each housing unit of each division toured. The laundry operates three shifts daily to assure timely return of clean laundry. CCDOC has created posters explaining why all clothing needs to be cleaned and disinfected through the laundry, developed videos for the inmate televisions, and have taken designated inmates to visit the laundry to see firsthand the laundry process. As discussed in 84.a above there was one incidence in Division 10 where staff could not demonstrate that the personal clothing had been collected.

##### **Monitor's Recommendations:**

1. Continue to monitor laundry usage for each division and report changes to management as necessary. Provide the Monitor with quarterly trend reports.
2. Supervisors need to review tier logs to verify that personal laundry has been collected in accordance with the schedule. CCDOC needs to amend the laundry policy to establish a

procedure outlining the steps to be taken when personal laundry is not collected according to the schedule.

#### **84. Sanitary Laundry Procedures**

**c. CCDOC shall train staff and educate inmates regarding laundry sanitation policies.**

##### **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

##### **Status Update:**

Inmate laundry workers assigned to the laundry are trained as to their responsibilities by officers assigned to General Order 24.11.3.0. The Order states the training includes both classroom and hands-on instruction as to the responsibilities, acceptable laundry sanitation practices and the use of laundry equipment, chemicals and the use personal protective equipment (PPE).

##### **Monitor's Assessment:**

The Monitor toured the laundry in both Division 4 and 5. The laundry in Division 5 utilizes veterans serving time to work there. There is little turnover, but new inmates are trained as needed.

This provision continues to be substantial compliance.

##### **Monitor's Recommendations:**

1. No further recommendations.

#### **84. Sanitary Laundry Procedures**

**d. CCDOC shall ensure that laundry delivery procedures protect inmates from exposure to communicable diseases by preventing clean laundry from coming into contact with dirty laundry or contaminated surfaces.**

##### **June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

##### **Status Update:**

Clean inmate laundry is returned to the division from which it came in bins that are sanitized with a disinfecting bleach wipe before clean uniforms, towels, bed linens and personal clothing are placed in the carts. All carts are thoroughly wiped by laundry workers and allowed to air dry. There are designated areas within each laundry that separate dirty laundry bins from those that have been cleaned and sanitized. Designated tables in each laundry are only used to sort and fold clean laundry. The tables are cleaned and disinfected at the beginning and at the end of each shift.

**Monitor's Assessment:**

The Monitor observed the inmate workers folding clean clothing and linens. Staff adequately explained the process of cleaning and disinfecting laundry bins and tables.

The provision continues to be substantially compliant.

**Monitor's Recommendations:**

1. No further recommendations.

**84. Sanitary Laundry Procedures**

e. CCDOC shall require inmates to provide all clothing and linens for laundering and prohibit inmates from washing and drying laundry outside the formal procedures.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

General Order 24.11.3.0 specifically prohibits inmates from washing and drying clothing, towels, or linen except through the designated CCDOC laundry. Further as discussed in Provision 84.a, living unit officers are required to confiscate any clothing or linen items being washed and replace them with clean dry clothing and/or linen. Inmate's uniform, personal clothing, linens and blankets are collected in accordance with the schedule posted in each housing unit in every.

CCDOC provides laundry loops for inmate personal clothing and assists inmates in their correct use to help assure that their clothing will not get lost. Personal laundry is returned to the inmate typically on the same shift of the same day it was collected. CCDOC has also removed laundry soap from the commissary order form to dissuade inmates from doing their own laundry. As discussed in 84.a, CCDOC continues to track by weight the amount of personal clothing submitted.



**Monitor's Assessment:**

Use of the CCDOC laundry system for uniforms, towels, linens, and blankets is for the most part universally accepted and practiced. A review of the laundry trend reports demonstrates that the inmate culture to not use the laundry is clearly changing. CCDOC has posted easy to understand posters, schedules, and shown videos on televisions. On this tour the Monitor observed very little personal clothing drying in cells or dayrooms. However, on this tour the Monitor noted numerous ropes in Division 6 and 10 indicative of them being used to dry towels and more than likely personal clothing. A few inmates in Division 10 complained that they do not use the laundry because they do not get back what they sent. This is most likely due to improperly securing the loop and leaving it too loose. Because this was only observed in isolated areas, the provision continues to be substantially compliant. This will be assessed again in upcoming tour. If not addressed, this provision could revert back to partial compliance.

**Monitor's Recommendations:**

1. Continue to regularly monitor and track the use of the laundry and as discussed above include a discussion and expectations as regular agenda topic at Divisional Superintendent's accountability meetings.
2. Supervisors need to enforce tier officers to collect ropes whenever they see them. The ropes can also be used as weapons against inmates and staff.

**85. Food Service**

a. CCDOC shall ensure that all food service at the Facility is operated in a safe and hygienic manner and that foods are served and maintained at safe temperatures.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE****Status Update:**

CCDOC contracts the food service operation to a contractor, currently CBM Premier Management to provide meals to all inmates. CBM utilizes the central kitchen for all food preparation. The Division 11 kitchen is only utilized for the hot meal for inmates housed there. Equipment and areas in both kitchens continues to be well maintained and clean. Two new steam cookers are installed at the main kitchen and should be operational in April.

CBM maintains responsibility for sanitation and maintenance of all equipment. They have two maintenance technicians who work on a schedule that allows for weekend coverage as needed.

Area and equipment cleaning and sanitation are done by inmate workers who are trained and supervised by CBM employees. CCDOC officers assigned to the kitchen provide security.

Together CCDOC, and CBM have improved the process to assure that inmates receive the hot meals are received hot by significantly reducing the delivery time for transporting the food from the Central Kitchen to all divisions. CCDOC Sanitarians regularly monitor and record food temperatures at the time of delivery to compare it with recorded temperatures taken as the food is placed in trays in the kitchens. CCDOC Sanitarians, kitchen security officers and Support Services Superintendent meet weekly with CBM to review grievances and address both operational and logistic issues. A meeting summary is produced following each meeting. It includes a running list of outstanding issues including resolutions.

CBM regularly measures and records food temperatures as food is placed in trays and as it leaves the kitchen to the divisions. Division staff also record food temperatures at delivery to the inmates.

CCDOC Sanitarians conduct unannounced inspections of both food service kitchens to assure that meals prepared are safe and that kitchens operate in accordance with Illinois Food Code regulations. They also review the regulatory inspections of both kitchens completed by the City of Chicago Health Department and meet with CBM to assure any violations are corrected...

#### **Monitor's Assessment:**

CBM has and continues to work closely with CCDOC Support Services staff to identify and resolve issues related to food service. CBM and CCDOC staff conduct "town hall" meetings with groups of inmates to understand foods that inmates enjoy and foods they would like to see eliminated. It has resulted in several changes such as offering bagels and honey buns, breakfast bars, etc. As a result of the analysis of the transportation and food temperature study, the Monitor did not receive any complaints about hot meals not being warm or hot. Further CBM is well along in considering purchasing some new insulated carts small enough to fit into the elevators of Division 10 (currently the only Division where the existing carts are not able to be used because of size.) The Monitor continues to suggest that CBM regularly receive feedback from inmates to improved processes.

CBM and CCDOC are considering eliminating all food preparation at Division 11 and instead prepare all food at the Central Kitchen and transport the bulk food there, using the kitchen only to load the trays. It is another attempt to reduce costs and assure inmates receive hot meals that are hot.

CBM provide cold meals on reusable trays or in sealed packaging that does not require a tray. This eliminates the Styrofoam trays that were being used to block vents. Trays for the hot meals and those used for some cold meals are collected following each meal service and returned to the kitchen for washing and sanitizing

CCDOC has ordered two new flight type conveyor warewashers to replace the aging Stero machines for which maintenance costs exceed the value of the equipment. The two new steam operated cooking kettles have, after over two years of waiting for permits from the City are now functional and being used for cooking adding significant capacity.

CBM has developed and implemented documented employee and inmate worker training programs, an internal inspection program, temperature monitoring program, formal staffing plans for employees and detainee workers, weekly cleaning schedules, a number of Standard Operating Procedures (SOPs), security standard and procedures, inmate kitchen worker orientation checklist, health screening, emergency evacuation plan in compliance with the fire safety committee, and an emergency food service contingency plan.

On this tour the Monitor toured both kitchens, reviewed temperature logs, area housekeeping instructions, storage rooms, refrigerators, and freezers and observed the process of filling the trays. CBM effectively uses inmate workers to fill the trays under direct supervision of both CBM staff and CCDOC staff. The operation is efficient and well organized. Both facilities are maintained clean. In fact the CCDOC provided the most recent inspection by the local health department on May 11, 2016 with outstanding scores of 96 and 99% respectively. For the three total violations found, CBM provided written evidence of that the corrections had been completed.

The Monitor found in reviewing the temperature logs that when refrigeration equipment was not able to maintain safe temperatures, potentially hazardous foods were immediately transferred to different equipment and the correction take noted directly on the temperature logs.

This provision continues to be in substantial compliance.

**Monitor's Recommendations:**

1. No further recommendations pertaining to the provision.

**85. Food Service**

- b. CCDOC shall ensure that all food service staff, including inmate staff, must be trained**

in food service operations, safe food handling procedures, and appropriate sanitation.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

All CBM management employees are Certified Food Safety Managers through the accredited Serv-Safe program and documentation is maintained showing that “Food Manager Certification” certificates that are current. CBM has established written job descriptions for all employee positions that include responsibilities and tasks. CBM provides orientation training to inmates daily. Inmates are required to sign an attendance sheet that is maintained by CBM management. A check list is used to assure inmates understand the food safety requirements pertaining to their assigned responsibilities. CCDOC Sanitarians developed an inmate training video that addresses health issues and personal hygiene that is shown to all potential inmate workers before they are assigned to work in the kitchens.

**Monitor’s Assessment:**

There is no change since the previous report. The State of Illinois requires food service managers to successfully complete a “State” approved food manager certification program. Six CBM management employees are currently certified by the State of Illinois. Eleven CBM employees have successfully completed the Serv-Safe Food Manager Certification. Certificates for those employees are posted in the employee break room.

This provision remains in substantial compliance.

**Monitor’s Recommendations:**

1. No further recommendations.

**85. Food Service**

c. CCDOC shall ensure that the Central Kitchen and Division 11 kitchen are staffed with a sufficient number of appropriately supervised and trained personnel.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

CBM maintains a staff of 57 full or part time employees with schedules to assure adequate coverage for all meals daily and including weekdays. They have a written food service staffing guide that outlines the starting and ending times for all employees. The kitchen operates two shifts, as cold meals are prepared in advance of their serving, and maintained refrigerated as

necessary. Additionally they utilize approximately 220 detainees scheduled over three, six or eight hour shifts just in the central kitchen to work in a variety of food service operations including preparation, filling meal trays, cleaning, warewashing, etc. Inmates from Division XI are assigned to work in that Division's kitchen to prepare and tray the dinner hot meal. At both kitchens the contractor is responsible for providing training and supervision their employees and the inmate workers assigned to the kitchen. CCDOC staff only provides security services.

CCDOC provides inmate workers as needed. They also provide security officers for safety supervision of inmates and for tool control and staff to transport and serve meals to the divisions. CCDOC provides the security training of kitchen staff.

**Monitor's Assessment:**

There is no change from the previous report. Support Services staff stated that CBM continues to maintain adequate number of qualified, trained and workforce at all times to assure timely preparation and service of meals to detainees. The regular weekly meetings between CCDOC Support Division including the staff sanitarians, security staff, CCDOC management and CBM leadership have been reduced to quarterly meetings and as needed because of the excellent relationship and the demonstrated cooperation of the contractor.

The provision remains in substantial compliance.

**Monitor's Recommendations:**

1. No further recommendations.

**85. Food Service**

D. CCDOC shall ensure that dishes and utensils, food preparation and storage areas, and vehicles and containers used to transport food are appropriately cleaned and sanitized.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

Equipment, utensils, and food preparation areas including floors, walls, and facilities are maintained clean through shift and daily cleaning schedules established by CBM. They have created and implemented written cleaning procedures for all equipment in accordance with the equipment manufacturer's specifications and a cleaning checklist/log for both kitchens along with a daily and weekly cleaning schedule for each room and the equipment in the kitchens such as the meat/packing room, wet room, bakery/packing room, dock, dry storage areas. It identifies what is to be cleaned, the frequency for cleaning and who is responsible for the

cleaning. CBM trains, uses, and supervises inmate workers to clean and sanitize all areas identified on the cleaning schedule. Once completed, the supervisor initials the log and the records are maintained and are available for the Sanitarians to review during their inspections. The trays used for all meals are washed and sanitized after each meal and the cleaned trays are stored on appropriately designed racks that allow water to drain and the trays to dry between uses. CCDOC has two operating warewashers that are capable of cleaning and sanitizing equipment and utensils.

**Monitor's Assessment:**

CBM continues to maintain all food service areas, equipment and utensils exceptionally clean. The kitchens are maintained as a model for institutional food service facilities. This includes walk-in refrigerators, freezers, dry storage areas, food preparation and assembly rooms, warewashing, carts used to transport food to the divisions, offices and laundry. Both inmate workers and employees understand the expectation for cleanliness and disinfection of surfaces. Management and supervisors expect and demand excellence from employees and inmate workers. Inmate workers are quickly replaced when they do not perform. As reported earlier, CCDOC has ordered two new Hobart flight type conveyor warewasher to replace the both Stero warewashers due to age and frequent repairs issues.

This provision remains in substantial compliance.

**Monitor's Recommendations:**

1. No further recommendations.

**85. Food Service**

- e. CCDOC shall check and record, on a regular basis, the temperatures in the refrigerators, coolers, walk-in-refrigerators, the dishwasher water, and all other kitchen equipment with temperature monitors to ensure proper maintenance of food service equipment.

**June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE**

**Status Update:**

The temperature monitoring and recording program implemented by CBM and monitored regularly by CCDOC Sanitarians demonstrates that this provision remains in substantial compliance. CBM has implemented an appropriate monitoring program to measure, record, and maintains logs for all refrigerators, freezers, and warewasher equipment. Logs of the temperature measurements are not only reviewed by CBM management, but also provided to the CCDOC Sanitarians weekly. Any required maintenance deemed necessary as a result of monitoring is completed by trained CBM maintenance workers. CCDOC Support Services Sanitarians, as well as regulatory inspectors continue to do independent monitoring of temperatures during their routine during unannounced inspections of both kitchens.

**Monitor's Assessment:**

There is no change from the previous report. The Monitor again reviewed temperature logs for several refrigerators and freezers in the central kitchen during this tour. The monitoring logs were current, legible and reviewed by management. One log showed that one specific walk-in was not able to continually hold potentially hazardous food at safe temperatures and CBM staff immediately transferred the food to a functioning one and noted the correction taken directly on the log. Fortunately CCDOC maintains adequate refrigeration capacity for both refrigerated and frozen food.

This provision remains in substantial compliance.

**Monitor's Recommendations:**

1. **No further recommendations.**